

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MARINO FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 653



Check if different than previously reported. (ACC)

WILLIAMSPORT

PA

17703

2. FEC IDENTIFICATION NUMBER ▼

C C00475145

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

PA

10

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2015

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Howard Rothenberg

Signature of Treasurer Howard Rothenberg

[Electronically Filed]

Date

M M / D D / Y Y Y Y

08

D D / Y Y Y Y

26

Y Y Y Y

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

MARINO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	137895.00	298842.54
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	137895.00	298842.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	54300.58	208089.53
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	54300.58	208089.53
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	246899.74	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MARINO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

## (a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

42600.00

163750.00

(ii) Unitemized.....

2795.00

9582.54

(iii) TOTAL of contributions from individuals ▶

45395.00

173332.54

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

92500.00

125510.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

137895.00

298842.54

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

4887.64

4887.64

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0.00

0.00

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0.00

0.00

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

142782.64

303730.18

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 82

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	54300.58	208089.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	4915.00	7203.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	59215.58	215292.53

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	163332.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	142782.64
25. SUBTOTAL (add Line 23 and Line 24).....	306115.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	59215.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	246899.74

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Daniel Astin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2015	
Mailing Address 358 Ring Road		<b>Transaction ID : SA11Al.18743</b>	
City Chadds Ford	State PA	Zip Code 19317	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Ciardi Ciardi & Astin	Occupation Partner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Kim Astin</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2015	
Mailing Address 358 Ring Road		<b>Transaction ID : SA11Al.18745</b>	
City CHadds Ford	State PA	Zip Code 19317	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer homemaker	Occupation homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Curtis Bounds</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2015	
Mailing Address 6 Pierson Drive		<b>Transaction ID : SA11Al.18985</b>	
City Hockessin	State DE	Zip Code 19707	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Bayard	Occupation attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		2000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>William G Bracey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2015	
Mailing Address RR 6, Box 6220		<b>Transaction ID : SA11AI.18722</b>	
City Moscow	State PA	Zip Code 18444	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Bracey's Supermarkets	Occupation President	contribution	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>William G Bracey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 01 / 2015	
Mailing Address RR 6, Box 6220		<b>Transaction ID : SA11AI.18723</b>	
City Moscow	State PA	Zip Code 18444	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Bracey's Supermarkets	Occupation President	contribution	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>David Brojack</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 26 / 2015	
Mailing Address 350 Commerce Drive		<b>Transaction ID : SA11AI.18754</b>	
City Scott Township	State PA	Zip Code 18447	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00	
Name of Employer Brojack Lumber Co	Occupation President	Contribution	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		6400.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**David Brojack**

Mailing Address 350 Commerce Drive

City

Scott Township

State

PA

Zip Code

18447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Brojack Lumber Co

Occupation

President

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2015

Transaction ID : SA11AI.19201

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**Mark Chehi**

Mailing Address 5 Little Brook Drive

City

Greenville

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Skadden Arps Slate Meagher

Occupation

attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11AI.19002

Amount of Each Receipt this Period

500.00

contribution

Full Name (Last, First, Middle Initial)

**Robert E. Chianelli**

Mailing Address 89 Belvedere Drive

City

Williamsport

State

PA

Zip Code

17701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Seswald Labs

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2015

Transaction ID : SA11AI.18757

Amount of Each Receipt this Period

250.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert E. Chianelli

A.

Mailing Address 89 Belvedere Drive

City

Williamsport

State

PA

Zip Code

17701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Seswald Labs

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		06		2015

Transaction ID : SA11AI.18774

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

Joseph DeSantis

B.

Mailing Address 180 Cecelia Acres Drive

City

Ivyland

State

PA

Zip Code

18974

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McMahon Associates Inc

Occupation

Consulting Transportation Engineer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		20		2015

Transaction ID : SA11AI.18708

Amount of Each Receipt this Period

250.00

contribution

Full Name (Last, First, Middle Initial)

Anthony DiMarino

C.

Mailing Address 40 Colonial Ridge Drive

City

Haddonfeld

State

NJ

Zip Code

08033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AJ DiMarino

Occupation

attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11AI.19039

Amount of Each Receipt this Period

500.00

contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 82

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Arthur DiPadova**

Mailing Address 76 Euclid Avenue

City Haddonfield	State NJ	Zip Code 08033
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Kulzer & DiPadova	Occupation attorney
---------------------------------------	------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11AI.18983

Amount of Each Receipt this Period

1000.00
---------

contribution

**B.** Full Name (Last, First, Middle Initial)  
**Jim Fox**

Mailing Address 60 East 42nd St

City New York	State NY	Zip Code 10165
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GlassRatner Advisory & Capital	Occupation principal
--	-------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA11AI.19010

Amount of Each Receipt this Period

350.00
--------

contribution

**C.** Full Name (Last, First, Middle Initial)  
**Joseph H Gibson**

Mailing Address 5040 Glenbrook Terrace NW

City Washington	State DC	Zip Code 20016
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer The Gibson Group	Occupation Owner
--------------------------------------	---------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 14 / 2015

Transaction ID : SA11AI.18694

Amount of Each Receipt this Period

1000.00
---------

contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2350.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Walter Gouldsbury**

Mailing Address 771 West Redman Avenue

City

Haddonfield

State

NJ

Zip Code

08033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Duane Morris LLP

Occupation

attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11AI.19004

Amount of Each Receipt this Period

1000.00

contribution

A.

Full Name (Last, First, Middle Initial)

**GSD LLC**

Mailing Address PO Box 2088

City

Wilmington

State

DE

Zip Code

19899

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2015

Transaction ID : SA11AI.18741

Amount of Each Receipt this Period

1000.00

contribution

B.

Full Name (Last, First, Middle Initial)

**Robert P Hager**

Mailing Address 231 Conrad Hill Road

City

Hughsville

State

PA

Zip Code

17737

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lindsay Hager &amp; Associates

Occupation

CPA

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2015

Transaction ID : SA11AI.18777

Amount of Each Receipt this Period

2700.00

contribution

C.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Timothy S Karr**

Mailing Address 101 Ninth Street

City

Danville

State

PA

Zip Code

17821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Villager Realty Inc

Occupation

President

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

Transaction ID : SA11AI.18769

Amount of Each Receipt this Period

250.00

contribution

Full Name (Last, First, Middle Initial)

**Timothy King**

Mailing Address 347 Mount Pleasant Avenue

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bederson LLP

Occupation

CPA

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11AI.18990

Amount of Each Receipt this Period

250.00

contribution

Full Name (Last, First, Middle Initial)

**Bruce Lisle**

Mailing Address PO Box 211

City

Mifflinburg

State

PA

Zip Code

17509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Energex Corporation

Occupation

CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

Transaction ID : SA11AI.19020

Amount of Each Receipt this Period

2700.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3200.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 82

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Bruce Lisle</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2015	
Mailing Address PO Box 211		<b>Transaction ID : SA11AI.19022</b>	
City Mifflinburg	State PA	Zip Code 17509	Amount of Each Receipt this Period contribution 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer Energex Corporation	Occupation CEO		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Heather Lisle</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2015	
Mailing Address PO Box 211		<b>Transaction ID : SA11AI.19023</b>	
City Mifflinburg	State PA	Zip Code 17509	Amount of Each Receipt this Period contribution 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer homemaker	Occupation homemaker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Heather Lisle</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2015	
Mailing Address PO Box 211		<b>Transaction ID : SA11AI.19025</b>	
City Mifflinburg	State PA	Zip Code 17509	Amount of Each Receipt this Period contribution 2700.00
FEC ID number of contributing federal political committee. C			
Name of Employer homemaker	Occupation homemaker		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		8100.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Michael Maholick

A.

Mailing Address 101 Terwood Lane

City

Lansdale

State

PA

Zip Code

19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McCormick Taylor

Occupation

Engineer

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2015

Transaction ID : SA11Al.18703

Amount of Each Receipt this Period

2000.00

contribution

Full Name (Last, First, Middle Initial)

Raymond Marshalek

B.

Mailing Address 1722 Quaker State Road

City

Montoursville

State

PA

Zip Code

17754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fairfield Manufacturing

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2015

Transaction ID : SA11Al.18767

Amount of Each Receipt this Period

400.00

contribution

Full Name (Last, First, Middle Initial)

Joseph McMahon

C.

Mailing Address 35 Medberg Lane

City

Wallingford

State

AA

Zip Code

19086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ciardi Ciardi &amp; Astin

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11Al.19000

Amount of Each Receipt this Period

500.00

contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Dan Renberg</b>			<b>Date of Receipt</b> <div> <div>M M / D D / Y Y Y Y</div> <div>06 / 25 / 2015</div> </div>		
<b>Mailing Address</b> 8800 Honeybee Lane			<b>Transaction ID : SA11AI.18939</b>		
<b>City</b> Bethesda	<b>State</b> MD	<b>Zip Code</b> 20617	<b>Amount of Each Receipt this Period</b> <div> <div>contribution</div> <div>250.00</div> </div>		
<b>FEC ID number of contributing federal political committee.</b> <div>C</div>			<b>contribution</b>		
<b>Name of Employer</b> Arent Fox		<b>Occupation</b> Partner	<b>Amount of Each Receipt this Period</b> <div> <div>contribution</div> <div>250.00</div> </div>		
<b>Receipt For: 2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> <div> <div></div> <div>250.00</div> </div>	<b>contribution</b>		
<b>B. Full Name (Last, First, Middle Initial)</b> <b>Howard Rothenberg</b>			<b>Date of Receipt</b> <div> <div>M M / D D / Y Y Y Y</div> <div>04 / 16 / 2015</div> </div>		
<b>Mailing Address</b> 102 Sturbridge Rd			<b>Transaction ID : SA11AI.18702</b>		
<b>City</b> Clarks Summit	<b>State</b> PA	<b>Zip Code</b> 18411	<b>Amount of Each Receipt this Period</b> <div> <div>contribution</div> <div>2600.00</div> </div>		
<b>FEC ID number of contributing federal political committee.</b> <div>C</div>			<b>contribution</b>		
<b>Name of Employer</b> Herlands Rothenberg & Levin		<b>Occupation</b> Attorney	<b>Amount of Each Receipt this Period</b> <div> <div>contribution</div> <div>2600.00</div> </div>		
<b>Receipt For: 2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> <div> <div></div> <div>2600.00</div> </div>	<b>contribution</b>		
<b>C. Full Name (Last, First, Middle Initial)</b> <b>Christopher Schultz</b>			<b>Date of Receipt</b> <div> <div>M M / D D / Y Y Y Y</div> <div>06 / 29 / 2015</div> </div>		
<b>Mailing Address</b> 298 Prospect Place			<b>Transaction ID : SA11AI.18988</b>		
<b>City</b> Brooklyn	<b>State</b> NY	<b>Zip Code</b> 11238	<b>Amount of Each Receipt this Period</b> <div> <div>contribution</div> <div>1000.00</div> </div>		
<b>FEC ID number of contributing federal political committee.</b> <div>C</div>			<b>contribution</b>		
<b>Name of Employer</b> Porzio Bromberg Newman PC		<b>Occupation</b> attorney	<b>Amount of Each Receipt this Period</b> <div> <div>contribution</div> <div>1000.00</div> </div>		
<b>Receipt For: 2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> <div> <div></div> <div>1000.00</div> </div>	<b>contribution</b>		
<b>SUBTOTAL of Receipts This Page (optional).....</b>			<div> <div>3850.00</div> </div>		
<b>TOTAL This Period (last page this line number only).....</b>			<div> <div></div> </div>		

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Paul Sloate**

Mailing Address 158 Brooklea Road

City

Bryn Mawr

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Green Drake Partners LLC

Occupation

Finance

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11Al.18981

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**Manuel Stamatakis**

Mailing Address 1111 West Dekalb Pike

City

Wayne

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Management Enterprises

Occupation

CEO

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2015

Transaction ID : SA11Al.18676

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**Carlyle Thorsen**

Mailing Address 3906 Aspen Street

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thorsen French Advocacy

Occupation

Owner

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2015

Transaction ID : SA11Al.18938

Amount of Each Receipt this Period

500.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Warren Tryon**

Mailing Address 216 9th Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RR &amp; G Public Advocates

Occupation

Senior Policy Advisor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : SA11AI.18695

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**Mark Valente III**

Mailing Address 7055 Leestone Street

City

Alexandria

State

VA

Zip Code

22151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Valente and Associates

Occupation

President

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1057.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2015

Transaction ID : SA11AI.18805

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**Hank Waida**

Mailing Address 105 Fallston Meadow Court

City

Fallston

State

MD

Zip Code

21047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Heritage Equity Partners

Occupation

Investment Banker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA11AI.19008

Amount of Each Receipt this Period

1000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Maria Walbridge</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 11 / 2015	
Mailing Address 6459 Lycoming Creek Road		<b>Transaction ID : SA11AI.18678</b>	
City Cogan Station	State PA	Zip Code 17728	Amount of Each Receipt this Period contribution 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Charlotte Zartman</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2015	
Mailing Address 200 Stetler Ave		<b>Transaction ID : SA11AI.18687</b>	
City Selinsgrove	State PA	Zip Code 17870	Amount of Each Receipt this Period contribution 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Gene Zartman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2015	
Mailing Address 200 Stetler Avenue		<b>Transaction ID : SA11AI.18792</b>	
City Selinsgrove	State PA	Zip Code 17870	Amount of Each Receipt this Period contribution 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		800.00	
<b>TOTAL</b> This Period (last page this line number only).....		42600.00	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**A. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2015

Transaction ID : SA11C.18786

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)  
**B. AMERICAN HOSPITAL ASSOCIATION PAC**Mailing Address 325 SEVENTH STREET, NW  
SUITE 700

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2015

Transaction ID : SA11C.18772

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)  
**C. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE**Mailing Address PALLADIAN 1  
220 LEIGH FARM RD

City	State	Zip Code
DURHAM	NC	27707

FEC ID number of contributing  
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2015

Transaction ID : SA11C.18785

Amount of Each Receipt this Period

2000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**A. AMERICAN PHARMACISTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 2215 CONSTITUTION AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20037

FEC ID number of contributing  
federal political committee.**C** C00193854

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SA11C.18953

Amount of Each Receipt this Period

1000.00  
contributionFull Name (Last, First, Middle Initial)  
**B. AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)**

Mailing Address 1111 North Fairfax St.

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing  
federal political committee.**C** C00012880

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		29		2015

Transaction ID : SA11C.18978

Amount of Each Receipt this Period

1000.00  
contributionFull Name (Last, First, Middle Initial)  
**C. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)**Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City	State	Zip Code
CHESTERBROOK	PA	19355

FEC ID number of contributing  
federal political committee.**C** C00400929

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

Transaction ID : SA11C.18697

Amount of Each Receipt this Period

2500.00  
contribution**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>AMGEN INC. POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>28</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		28		2015
M M	/	D D	/	Y Y Y Y								
06		28		2015								
Mailing Address 601 13TH STREET, NW 12TH FLOOR		<b>Transaction ID : SA11C.19013</b>  Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> contribution	1000.00									
1000.00												
City WASHINGTON State DC Zip Code 20005												
FEC ID number of contributing federal political committee. <b>C</b> C00251876												
Name of Employer Occupation Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00										
1000.00												

<b>B.</b> Full Name (Last, First, Middle Initial) <b>ARNOLD &amp; PORTER LLP PARTNERS POLITICAL ACTION COMMITTEE</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>15</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	04		15		2015
M M	/	D D	/	Y Y Y Y								
04		15		2015								
Mailing Address 555 12TH STREET, NW		<b>Transaction ID : SA11C.18698</b>  Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> contribuion	1000.00									
1000.00												
City WASHINGTON State DC Zip Code 20004												
FEC ID number of contributing federal political committee. <b>C</b> C00216895												
Name of Employer Occupation Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00										
1000.00												

<b>C.</b> Full Name (Last, First, Middle Initial) <b>AT&amp;T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&amp;T FEDERAL PAC)</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>14</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	04		14		2015
M M	/	D D	/	Y Y Y Y								
04		14		2015								
Mailing Address 208 S. Akard Street Suite 3521		<b>Transaction ID : SA11C.18691</b>  Amount of Each Receipt this Period <table border="1"> <tr> <td>4000.00</td> </tr> </table> contribution	4000.00									
4000.00												
City Dallas State TX Zip Code 75202												
FEC ID number of contributing federal political committee. <b>C</b> C00109017												
Name of Employer Occupation Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
Election Cycle-to-Date <table border="1"> <tr> <td>4000.00</td> </tr> </table>		4000.00										
4000.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td>6000.00</td> </tr> </table>	6000.00
6000.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE**

Mailing Address 410 SEVENTEENTH STREET

SUITE 2200

City

DENVER

State

CO

Zip Code

80202

FEC ID number of contributing  
federal political committee.**C** C00390583

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2015

**Transaction ID : SA11C.18692**

Amount of Each Receipt this Period

500.00

contribution

Full Name (Last, First, Middle Initial)

**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

Mailing Address 7000 CARDINAL PLACE

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.**C** C00332833

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

**Transaction ID : SA11C.18798**

Amount of Each Receipt this Period

2500.00

contribution

Full Name (Last, First, Middle Initial)

**CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC**

Mailing Address 7000 CARDINAL PLACE

City

DUBLIN

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.**C** C00332833

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		18		2015

**Transaction ID : SA11C.18956**

Amount of Each Receipt this Period

2500.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

**A.** Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 04 2015

Transaction ID : SA11C.18727

Amount of Each Receipt this Period

1000.00  
contribution

Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

**B.** Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 29 2015

Transaction ID : SA11C.18997

Amount of Each Receipt this Period

3000.00  
contribution

Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

**C.** Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 29 2015

Transaction ID : SA11C.18998

Amount of Each Receipt this Period

5000.00  
contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

9000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DIRECTV GROUP, INC. FUND - FEDERAL (DIRECTV PAC)**Mailing Address 901 F STREET, NW  
SUITE 600

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.**C** C00331991

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2015

**Transaction ID : SA11C.18690**

Amount of Each Receipt this Period

2500.00

contribution

Full Name (Last, First, Middle Initial)

**DOMINION POLITICAL ACTION COMMITTEE**Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR  
P.O. BOX 26666

City	State	Zip Code
RICHMOND	VA	23261

FEC ID number of contributing  
federal political committee.**C** C00108209

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2015

**Transaction ID : SA11C.18802**

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**FINANCIAL SERVICES ROUNDTABLE PAC**Mailing Address 600 13TH STREET, N.W.  
SUITE 400

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.**C** C00193177

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2015

**Transaction ID : SA11C.18705**

Amount of Each Receipt this Period

1000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 76 SOUTH MAIN STREET

City

AKRON

State

OH

Zip Code

44308

FEC ID number of contributing  
federal political committee.**C** C00140855

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2015

**Transaction ID : SA11C.18680**

Amount of Each Receipt this Period

1000.00  
contribution

Full Name (Last, First, Middle Initial)

**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900W

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00024869

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2015

**Transaction ID : SA11C.18730**

Amount of Each Receipt this Period

1000.00  
contribution

Full Name (Last, First, Middle Initial)

**GRIDIRON-PAC**

Mailing Address 345 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10154

FEC ID number of contributing  
federal political committee.**C** C00451153

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

**Transaction ID : SA11C.19014**

Amount of Each Receipt this Period

1000.00  
contribution**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 HEALTHCARE DISTRIBUTION MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE

**A.** Mailing Address 901 N. GLEBE ROAD, SUITE 1000

City	State	Zip Code
ARLINGTON	VA	22203

FEC ID number of contributing  
federal political committee.

**C** C00247569

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 20 2015

Transaction ID : SA11C.18714

Amount of Each Receipt this Period

2500.00  
 contribution

Full Name (Last, First, Middle Initial)  
**B. INTEL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET N.W. #1025

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.

**C** C00125641

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 29 2015

Transaction ID : SA11C.19015

Amount of Each Receipt this Period

1000.00  
 contribution

Full Name (Last, First, Middle Initial)  
**C. J P MORGAN CHASE BANK N A**

Mailing Address 10 S DEARBORN STREET IL1-0520

City	State	Zip Code
CHICAGO	IL	60603

FEC ID number of contributing  
federal political committee.

**C** C70005343

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 17 2015

Transaction ID : SA11C.18733

Amount of Each Receipt this Period

2500.00  
 contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)**

Mailing Address 1601 K STREET, NW

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing  
federal political committee.

**C** C00213173

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 16 / 2015

**Transaction ID : SA11C.18799**

Amount of Each Receipt this Period

1000.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 1550 Crystal Drive  
Suite 300

City	State	Zip Code
Arlington	VA	22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 25 / 2015

**Transaction ID : SA11C.18719**

Amount of Each Receipt this Period

1000.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 1550 Crystal Drive  
Suite 300

City	State	Zip Code
Arlington	VA	22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 15 / 2015

**Transaction ID : SA11C.18729**

Amount of Each Receipt this Period

1000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE****A.**
 Mailing Address 1550 Crystal Drive  
 Suite 300

City	State	Zip Code
Arlington	VA	22202

FEC ID number of contributing federal political committee.

☒ C00303024

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

 4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		01		2015

**Transaction ID : SA11C.18773**

Amount of Each Receipt this Period

 1000.00  
 contribution

Full Name (Last, First, Middle Initial)

**MCKESSON CORPORATION EMPLOYEES POLITICAL FUND****B.**
 Mailing Address ONE POST STREET  
 34TH FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94104

FEC ID number of contributing federal political committee.

☒ C00108035

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

 5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2015

**Transaction ID : SA11C.18947**

Amount of Each Receipt this Period

 5000.00  
 contribution

Full Name (Last, First, Middle Initial)

**MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE****C.**
 Mailing Address 16011 NE 36th Way  
 Box 97017

City	State	Zip Code
Redmond	WA	98073

FEC ID number of contributing federal political committee.

☒ C00227546

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

 3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

**Transaction ID : SA11C.18957**

Amount of Each Receipt this Period

 3500.00  
 contribution
**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....
 9500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 1600 EYE STREET NW

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.**C** C00139519

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		29		2015

**Transaction ID : SA11C.19016**

Amount of Each Receipt this Period

1500.00

contribution

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC****B.**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00238725

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

**Transaction ID : SA11C.19032**

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF CHAIN DRUG STORES POLITICAL ACTION COMMITTEE****C.**

Mailing Address 413 N. LEE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00022368

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		01		2015

**Transaction ID : SA11C.18782**

Amount of Each Receipt this Period

1000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

3500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N MICHIGAN AVENUE

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing  
federal political committee.**C** C70002563

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		25		2015

**Transaction ID : SA11C.18943**

Amount of Each Receipt this Period

1000.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.**C** C00010082

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		04		2015

**Transaction ID : SA11C.18726**

Amount of Each Receipt this Period

1000.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.**C** C00030809

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		15		2015

**Transaction ID : SA11C.18699**

Amount of Each Receipt this Period

2500.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND****A.**

Mailing Address 11250 WAPLES MILL ROAD

City

FAIRFAX

State

VA

Zip Code

22030

FEC ID number of contributing  
federal political committee.**C** C00053553

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2015

**Transaction ID : SA11C.18801**

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)

**NATIONAL SHOOTING SPORTS FOUNDATION INC PAC****B.**

Mailing Address 11 MILE HILL RD

City

NEWTOWN

State

CT

Zip Code

06470

FEC ID number of contributing  
federal political committee.**C** C00480863

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2015

**Transaction ID : SA11C.18807**

Amount of Each Receipt this Period

2500.00

contribution

Full Name (Last, First, Middle Initial)

**NISOURCE INC. PAC****C.**

Mailing Address 200 CIVIC CENTER DRIVE

City

COLUMBUS

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.**C** C00051979

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2015

**Transaction ID : SA11C.18737**

Amount of Each Receipt this Period

1000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PPL PEOPLE FOR GOOD GOVERNMENT**

Mailing Address Two North Ninth Street  
 GENTW2

City	State	Zip Code
Allentown	PA	18101

FEC ID number of contributing  
federal political committee.

**C** C00228106

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		25		2015

Transaction ID : SA11C.18955

Amount of Each Receipt this Period

2500.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**PPL PEOPLE FOR GOOD GOVERNMENT**

Mailing Address Two North Ninth Street  
 GENTW2

City	State	Zip Code
Allentown	PA	18101

FEC ID number of contributing  
federal political committee.

**C** C00228106

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2015

Transaction ID : SA11C.19017

Amount of Each Receipt this Period

2500.00  
 contribution

**C.** Full Name (Last, First, Middle Initial)  
**RENAL PHYSICIANS ASSOCIATION PAC RPA PAC**

Mailing Address 1700 ROCKVILLE PIKE SUITE 220

City	State	Zip Code
ROCKVILLE	MD	20852

FEC ID number of contributing  
federal political committee.

**C** C00409391

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : SA11C.18800

Amount of Each Receipt this Period

2500.00  
 contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**
**A.** Full Name (Last, First, Middle Initial)  
**RITE AID CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 30 HUNTER LANE

City	State	Zip Code
CAMP HILL	PA	17011

FEC ID number of contributing federal political committee.

**C** C00104083

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		01		2015

**Transaction ID : SA11C.18725**

Amount of Each Receipt this Period

1000.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
**SANOI PASTEUR POLITICAL ACTION COMMITTEE**

Mailing Address DISCOVERY DRIVE

City	State	Zip Code
SWIFTWATER	PA	18370

FEC ID number of contributing federal political committee.

**C** C00215236

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		12		2015

**Transaction ID : SA11C.18731**

Amount of Each Receipt this Period

5000.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
**SONY PICTURES ENTERTAINMENT, INC. PAC**

Mailing Address 10202 W. WASHINGTON BLVD.

City	State	Zip Code
CULVER CITY	CA	90232

FEC ID number of contributing federal political committee.

**C** C00282038

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		30		2015

**Transaction ID : SA11C.19018**

Amount of Each Receipt this Period

1500.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

7500.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 SYNGENTA CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (SYNGENTA PAC)

**A.**

Mailing Address 1775 PENNSYLVANIA AVENUE NW  
 SUITE 600

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00363945

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 11 / 2015

Transaction ID : SA11C.18684

Amount of Each Receipt this Period

5000.00

contribution

Full Name (Last, First, Middle Initial)  
 THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 101 CONSTITUTION AVENUE, NW  
 SUITE 1000 EAST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00350744

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 27 / 2015

Transaction ID : SA11C.18728

Amount of Each Receipt this Period

1000.00

contribution

Full Name (Last, First, Middle Initial)  
 THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 1627 EYE STREET NW SUITE 900

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing  
federal political committee.

**C** C00040394

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 06 / 22 / 2015

Transaction ID : SA11C.18942

Amount of Each Receipt this Period

1000.00

contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**A. Full Name (Last, First, Middle Initial)  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)**

Mailing Address 9900 BREN ROAD EAST

City	State	Zip Code
MINNETONKA	MN	55343

FEC ID number of contributing  
federal political committee.

C C00274431

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2015

Transaction ID : SA11C.18780

Amount of Each Receipt this Period

1000.00

contribution

B. Full Name (Last, First, Middle Initial)  
**UNITED STATES TELECOM ASSOCIATION POLITICAL ACTION COMMITTEE (TELECOMPAC)**Mailing Address 607 14TH STREET NORTHWEST  
SUITE 400

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.

C C00000984

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2015

Transaction ID : SA11C.18713

Amount of Each Receipt this Period

1000.00

contribution

C. Full Name (Last, First, Middle Initial)  
**WALGREEN CO PAC**

Mailing Address 104 WILMOT ROAD MS #1447

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing  
federal political committee.

C C00160770

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2015

Transaction ID : SA11C.18732

Amount of Each Receipt this Period

1000.00

contribution

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

92500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Victory for Pennsylvania Fund**

Mailing Address 2470 Daniels Bridge Road  
Suite 121

City State Zip Code  
Athens GA 30606

FEC ID number of contributing  
federal political committee.**C** C00577031

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4887.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SA12.19100**

Amount of Each Receipt this Period

4887.64

Joint Fundraising contributions

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Calore**

Mailing Address 30 Kirkendall Avenue

City State Zip Code  
Wilkes Barre PA 18702

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

**Transaction ID : SA12.19100.0**

Amount of Each Receipt this Period

16.66

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Eugene Brady**

Mailing Address 11 Nuangola Ave

City State Zip Code  
Mountain Top PA 18707

FEC ID number of contributing  
federal political committee.**C**

Name of Employer  
Commission on Economic Opportu

Occupation  
exec director

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

101.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

**Transaction ID : SA12.19100.1**

Amount of Each Receipt this Period

101.66

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....

4887.64

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Charles Adams

A.

Mailing Address 180 C Heisz St

City

Edwardsville

State

PA

Zip Code

18704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

retired

Occupation

retired

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

33.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.2

Amount of Each Receipt this Period

33.34

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Joseph Vullo

B.

Mailing Address 1460 Wyoming Avenue

City

Forty Fort

State

PA

Zip Code

18704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Koff Mangan Vullo

Occupation

attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

33.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.3

Amount of Each Receipt this Period

33.34

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Brenda Degnan

C.

Mailing Address 18 McCarragher Street

City

Wilkes Barre

State

PA

Zip Code

18702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.4

Amount of Each Receipt this Period

16.66

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>R. Duffy</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2015	
Mailing Address 134 Division Street		<b>Transaction ID : SA12.19100.5</b>	
City Kingston	State PA	Zip Code 18704	Amount of Each Receipt this Period 33.34
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer Comm on Economic Opportunity	Occupation director	<b>[MEMO ITEM]</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 33.34		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Betsy Bayzick</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2015	
Mailing Address 151 East County Road		<b>Transaction ID : SA12.19100.6</b>	
City Drums	State PA	Zip Code 18222	Amount of Each Receipt this Period 41.66
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer homemaker	Occupation homemaker	<b>[MEMO ITEM]</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 41.66		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ronald Steele</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2015	
Mailing Address 610 W 3rd Street		<b>Transaction ID : SA12.19100.7</b>	
City Erie	State PA	Zip Code 16504	Amount of Each Receipt this Period 16.67
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer CEO	Occupation GECAC	<b>[MEMO ITEM]</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16.67		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		0.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**A. Thomas Kennedy**

Mailing Address 200 W Chapel Street

City	State	Zip Code
Hazleton	PA	18201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.8

Amount of Each Receipt this Period

16.67

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Carl Kaschenbach III**

Mailing Address 11 Spencer Road

City	State	Zip Code
Dallas	PA	18612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Comm on Economic Opportunity

Coordinator

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

33.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.9

Amount of Each Receipt this Period

33.33

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. William Joyce**

Mailing Address 9 N Main St

City	State	Zip Code
Pittston	PA	18641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.10

Amount of Each Receipt this Period

16.67

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Barbara Gomb

Mailing Address 33 Preston St

City

Ashley

State

PA

Zip Code

18706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Comm on Economic Opportunity

Occupation

Supervisor

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.11

Amount of Each Receipt this Period

16.66

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. James Zoccola

Mailing Address 302 New Hancock St

City

Wilkes Barre

State

PA

Zip Code

18702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Commission on Economic Opportu

Occupation

Human Services

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

33.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.12

Amount of Each Receipt this Period

33.34

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Catherine Matalonis

Mailing Address 154 Cliff St

City

Pittston

State

PA

Zip Code

18640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Commission on Economic Opportu

Occupation

Human Resources

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.13

Amount of Each Receipt this Period

16.66

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl McLaughlin**

Mailing Address 9 VALley View Drive

City	State	Zip Code
Mountain Top	PA	18707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

6.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.14

Amount of Each Receipt this Period

6.67

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**Gary Lamont**

Mailing Address 455 SR 93

City	State	Zip Code
Sugarloaf	PA	18249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.15

Amount of Each Receipt this Period

16.67

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**Karen F. Ezzo**

Mailing Address 1113 Constitutional Drive

City	State	Zip Code
Stroudsburg	PA	18360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.16

Amount of Each Receipt this Period

3.33

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Kathryn O'Neill**

Mailing Address 109 Miner St

City

Wilkes Barre

State

PA

Zip Code

18702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Comm on Economic Opportunity

Occupation

Social Worker

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

33.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.17

Amount of Each Receipt this Period

33.33

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**David Ritter**

Mailing Address 28 Pine Tree Road

City

Mountain Top

State

PA

Zip Code

18707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Director of Housing Counseling

Occupation

Comm on Economic Opportunity

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

33.34

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.18

Amount of Each Receipt this Period

33.34

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**Cynthia Vullo**

Mailing Address 132 Philadelphia Avenue

City

West Pittston

State

PA

Zip Code

18643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Koff Mangan Vullo Gartley

Occupation

attorney

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

41.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SA12.19100.19

Amount of Each Receipt this Period

41.66

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Cornelia Steele</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015		
Mailing Address 557 W 3rd St			<b>Transaction ID : SA12.19100.20</b>		
City Erie	State PA	Zip Code 16507	Amount of Each Receipt this Period _____ 16.67		
FEC ID number of contributing federal political committee.		C _____	JFC-Victory for Pennsylvania Fund		
Name of Employer		Occupation	<b>[MEMO ITEM]</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 16.67			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Abram Howze</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015		
Mailing Address 2340 C East 43rd St			<b>Transaction ID : SA12.19100.21</b>		
City Erie	State PA	Zip Code 16510	Amount of Each Receipt this Period _____ 16.67		
FEC ID number of contributing federal political committee.		C _____	JFC-Victory for Pennsylvania Fund		
Name of Employer		Occupation	<b>[MEMO ITEM]</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 16.67			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Gerald Blanks</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2015		
Mailing Address 4685 Meadowbrook Dr			<b>Transaction ID : SA12.19100.22</b>		
City Erie	State PA	Zip Code 16510	Amount of Each Receipt this Period _____ 16.66		
FEC ID number of contributing federal political committee.		C _____	JFC-Victory for Pennsylvania Fund		
Name of Employer		Occupation	<b>[MEMO ITEM]</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 16.66			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 0.00		
<b>TOTAL</b> This Period (last page this line number only).....			_____		

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Georgia DelFreo**

Mailing Address 4114 Alan Drive

City Erie	State PA	Zip Code 16510
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Greater Erie Comm Action Comm	Occupation Human Services
---	------------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.23

Amount of Each Receipt this Period

50.00

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Vivian McCullum**

Mailing Address 1436 Atkins Street

City Erie	State PA	Zip Code 16503
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
16.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.24

Amount of Each Receipt this Period

16.67

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Dianne Presogna**

Mailing Address 8018 Sandy Trail

City Erie	State PA	Zip Code 16510
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
16.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.25

Amount of Each Receipt this Period

16.67

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Roderick Blaine</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 4663 Memorial Hwy		<b>Transaction ID : SA12.19100.26</b>	
City Harveys Lake	State PA	Zip Code 18618	Amount of Each Receipt this Period 16.66
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer  	Occupation  		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16.66		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Frank Crossin</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 575 Pierce Street		<b>Transaction ID : SA12.19100.27</b>	
City Kingston	State PA	Zip Code 18704	Amount of Each Receipt this Period 33.34
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer Comm on Economic Opportunity	Occupation Human Services		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 33.34		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Barbara Steele</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2015	
Mailing Address 610 W 3rd St		<b>Transaction ID : SA12.19100.28</b>	
City Erie	State PA	Zip Code 16507	Amount of Each Receipt this Period 16.67
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer  	Occupation  		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16.67		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		0.00	
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Karen Sed**

Mailing Address 395 E State St

City Sharon	State PA	Zip Code 16146
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Winner Holdings	Occupation CEO
-------------------------------------	-------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
41.67

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.29

Amount of Each Receipt this Period

41.67

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Frank Conyngham**

Mailing Address 209 Onondaga Avenue

City Warren	State PA	Zip Code 16385
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Conyngham Hudson & Assoc	Occupation consultant
--	--------------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
33.33

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.30

Amount of Each Receipt this Period

33.33

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Susan Wychulis**

Mailing Address 201 Meadow Ln  
Apt 34

City Harrisburg	State PA	Zip Code 17104
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Comm Action Assoc of PA	Occupation CEO
---	-------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
83.33

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.31

Amount of Each Receipt this Period

83.33

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Edward Sitter

Mailing Address 4635 State Street

City

Erie

State

PA

Zip Code

16509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.67

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.32

Amount of Each Receipt this Period

16.67

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

COMMUNITY ACTION PROGRAM - POLITICAL ACTION COMMITTEE (CAP-PAC)

Mailing Address 1 MASSACHUSETTS AVENUE, NW  
SUITE 310

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00163048

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1666.67

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2015

Transaction ID : SA12.19100.33

Amount of Each Receipt this Period

1666.67

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

ARENT FOX LLP PAC (AFPAC)

Mailing Address ARENT FOX LLP  
1717 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C C00241380

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SA12.19100.34

Amount of Each Receipt this Period

500.00

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

MARINO FOR CONGRESS

Full Name (Last, First, Middle Initial)

COMMUNITY ACTION PROGRAM - POLITICAL ACTION COMMITTEE (CAP-PAC)

A.

Mailing Address 1 MASSACHUSETTS AVENUE, NW  
SUITE 310

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

C C00163048

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA12.19100.35

Amount of Each Receipt this Period

833.33

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

COMMUNITY ACTION PROGRAM - POLITICAL ACTION COMMITTEE (CAP-PAC)

B.

Mailing Address 1 MASSACHUSETTS AVENUE, NW  
SUITE 310

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing  
federal political committee.

C C00163048

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA12.19100.36

Amount of Each Receipt this Period

1250.00

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Robert Raible

C.

Mailing Address 209 Onondaga Ave

City	State	Zip Code
Warren	PA	16385

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Warren Forest EOC

Occupation

exec director

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

83.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA12.19100.37

Amount of Each Receipt this Period

83.33

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**JB Reilly**

Mailing Address 1577 Saucon Valley Road

City	State	Zip Code
Bethlehem	PA	18015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Center City Investment CorpOccupation  
Real Estate Developer

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

416.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA12.19100.38

Amount of Each Receipt this Period

416.67

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****B.** Full Name (Last, First, Middle Initial)  
**Ann McManus**

Mailing Address 1296 SUnset Circle

City	State	Zip Code
Slatington	PA	18080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA12.19100.39

Amount of Each Receipt this Period

4.17

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****C.** Full Name (Last, First, Middle Initial)  
**Dolores Singletary**

Mailing Address 1825 Watkins St, Apt D9

City	State	Zip Code
Bethlehem	PA	18016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : SA12.19100.40

Amount of Each Receipt this Period

4.16

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 82

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Marveline Costenbader**

Mailing Address 3 Costenbader Lane

City	State	Zip Code
Palmerton	PA	18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA12.19100.41

Amount of Each Receipt this Period

25.00

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**Kimberly Miller**

Mailing Address 215 Conte Avenue

City	State	Zip Code
Jim Thorpe	PA	18229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

25.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA12.19100.42

Amount of Each Receipt this Period

25.00

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**Ronal Errett**

Mailing Address 1326 Farrell Terrace

City	State	Zip Code
Farrell	PA	16121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CAP Mercer

Exec Director

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

108.34

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA12.19100.43

Amount of Each Receipt this Period

108.34

JFC-Victory for Pennsylvania Fund

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 50 OF 82

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**Daniel Leppo**

Mailing Address 3119 N 2nd St

City

Harrisburg

State

PA

Zip Code

17110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

16.66

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA12.19100.44

Amount of Each Receipt this Period

16.66

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**Christopher Reid**

Mailing Address 563 Cherry Hill Road

City

Nazareth

State

PA

Zip Code

18064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

83.34

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA12.19100.45

Amount of Each Receipt this Period

83.34

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**Alan Jennings**

Mailing Address 2130 W Gordon St

City

Allentown

State

PA

Zip Code

18104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

41.66

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

Transaction ID : SA12.19100.46

Amount of Each Receipt this Period

41.66

JFC-Victory for Pennsylvania Fund

**[MEMO ITEM]****SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**MARINO FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Daniel Bosket</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2015	
Mailing Address PO Box 1314		<b>Transaction ID : SA12.19100.47</b>	
City Allentown	State PA	Zip Code 18105	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer	Occupation		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 25.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Sharon Weaver</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2015	
Mailing Address 5208 W State St		<b>Transaction ID : SA12.19100.48</b>	
City Coopersburg	State PA	Zip Code 18036	Amount of Each Receipt this Period 8.34
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer	Occupation		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8.34		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Javier Toro</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2015	
Mailing Address 832 Delaware Avenue		<b>Transaction ID : SA12.19100.49</b>	
City Fountain Hill	State PA	Zip Code 18065	Amount of Each Receipt this Period 6.66
FEC ID number of contributing federal political committee. C		JFC-Victory for Pennsylvania Fund	
Name of Employer	Occupation		<b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6.66		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		0.00	
<b>TOTAL</b> This Period (last page this line number only).....		4887.64	

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ryan Barton**

Mailing Address 4934 Parkvue Drive

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
Campaign management expenses-see memos

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2015

Amount of Each Disbursement this Period

8250.82
---------

Transaction ID : SB17.18862

**B. Ryan Barton**

Mailing Address 4934 Parkvue Drive

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
Campaign management consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2015

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB17.18862.0

[MEMO ITEM]

**c. Ryan Barton**

Mailing Address 4934 Parkvue Drive

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2015

Amount of Each Disbursement this Period

3184.16
---------

Transaction ID : SB17.18862.1

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8250.82

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 82

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ryan Barton**

Mailing Address 4934 Parkvue Drive

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
Reimbursed expenses-cellualr phone service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 06 / 2015

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.18862.2

**[MEMO ITEM]****B. The Villa**

Mailing Address 2016 E 3rd St

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
meeting expense-food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 06 / 2015

Amount of Each Disbursement this Period

81.56
-------

Transaction ID : SB17.18862.5

**[MEMO ITEM]****c. Ryan Barton**

Mailing Address 4934 Parkvue Drive

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
reimbursed expense-parking

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 06 / 2015

Amount of Each Disbursement this Period

9.00
------

Transaction ID : SB17.18862.8

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 82

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Ryan Barton**

Mailing Address 4934 Parkvue Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
Campaign management expenses-see memos

Amount of Each Disbursement this Period

5031.12
---------

Transaction ID : SB17.18966

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Ryan Barton**

Mailing Address 4934 Parkvue Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
campaign management consulting

Amount of Each Disbursement this Period

2500.00
---------

Transaction ID : SB17.18966.0

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Ryan Barton**

Mailing Address 4934 Parkvue Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

City	State	Zip Code
Pittsburgh	PA	15236

Purpose of Disbursement  
travel reimbursement-mileage

Amount of Each Disbursement this Period

2381.12
---------

Transaction ID : SB17.18966.1

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5031.12



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 Spring Hill Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2015

City	State	Zip Code
Tysons Corner	VA	22182

Amount of Each Disbursement this Period

12345678901234567890
20.25

Purpose of Disbursement  
Database service feeCategory/  
Type

Transaction ID : SB17.18819

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 Spring Hill Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2015

City	State	Zip Code
Tysons Corner	VA	22182

Amount of Each Disbursement this Period

12345678901234567890
800.00

Purpose of Disbursement  
Database management feeCategory/  
Type

Transaction ID : SB17.18842

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 Spring Hill Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		26		2015

City	State	Zip Code
Tysons Corner	VA	22182

Amount of Each Disbursement this Period

12345678901234567890
800.00

Purpose of Disbursement  
Database management feeCategory/  
Type

Transaction ID : SB17.18878

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1620.25



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 Spring Hill Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2015

City	State	Zip Code
Tysons Corner	VA	22182

Amount of Each Disbursement this Period

4.95
------

Purpose of Disbursement  
Database service feeCategory/  
Type**Transaction ID : SB17.18913**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 Spring Hill Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

City	State	Zip Code
Tysons Corner	VA	22182

Amount of Each Disbursement this Period

800.00
--------

Purpose of Disbursement  
database management feeCategory/  
Type**Transaction ID : SB17.18965**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Maria Diesel**

Mailing Address 1533 Johnnys Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

City	State	Zip Code
West Chester	PA	19382

Amount of Each Disbursement this Period

1320.00
---------

Purpose of Disbursement  
Fundraising consultingCategory/  
Type**Transaction ID : SB17.18821**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2124.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 82

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Maria Diesel**

Mailing Address 1533 Johnnys Way

City	State	Zip Code
West Chester	PA	19382

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2015

Amount of Each Disbursement this Period

248.00
--------

Transaction ID : SB17.18843

**B. Maria Diesel**

Mailing Address 1533 Johnnys Way

City	State	Zip Code
West Chester	PA	19382

Purpose of Disbursement  
fundraising consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

880.00
--------

Transaction ID : SB17.19048

**c. District City Consulting**

Mailing Address 1217 Delafield Place NW

City	State	Zip Code
Washington	DE	20011

Purpose of Disbursement  
Fundraising expenses-see memos

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2015

Amount of Each Disbursement this Period

1544.68
---------

Transaction ID : SB17.18837

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2672.68

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Meeting expense-food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2015

Amount of Each Disbursement this Period

4.40
------

Transaction ID : SB17.18837.0

**[MEMO ITEM]****B. Capitol Hill Club**

Mailing Address 300 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Metting expense-food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2015

Amount of Each Disbursement this Period

8.45
------

Transaction ID : SB17.18837.1

**[MEMO ITEM]****C. District City Consulting**

Mailing Address 1217 Delafield Place NW

City	State	Zip Code
Washington	DE	20011

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2015

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.18837.2

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. District City Consulting**

Mailing Address 1217 Delafield Place NW

City	State	Zip Code
Washington	DE	20011

Purpose of Disbursement  
Fundraising postage reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2015

Amount of Each Disbursement this Period

31.83
-------

Transaction ID : SB17.18837.3

**[MEMO ITEM]****B. District City Consulting**

Mailing Address 1217 Delafield Place NW

City	State	Zip Code
Washington	DE	20011

Purpose of Disbursement  
Fundraising consulting-see memos

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Disbursement this Period

7711.88
---------

Transaction ID : SB17.18914

**C. District City Consulting**

Mailing Address 1217 Delafield Place NW

City	State	Zip Code
Washington	DE	20011

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2015

Amount of Each Disbursement this Period

2950.00
---------

Transaction ID : SB17.18914.0

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7711.88
---------

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Acqua AI 2**

Mailing Address 212 7th Street Southeast

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising Expense - Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2015

Amount of Each Disbursement this Period

2224.95
---------

Transaction ID : SB17.18914.1

**[MEMO ITEM]****B. Tortilla Coast**

Mailing Address 400 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising Expense - Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2015

Amount of Each Disbursement this Period

376.84
--------

Transaction ID : SB17.18914.2

**[MEMO ITEM]****c. Trattoria Alberto**

Mailing Address 506 Eighth Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising Expense - Catering

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2015

Amount of Each Disbursement this Period

431.02
--------

Transaction ID : SB17.18914.3

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. District City Consulting**

Mailing Address 1217 Delafield Place NW

City	State	Zip Code
Washington	DE	20011

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2015

Amount of Each Disbursement this Period

1550.00
---------

Transaction ID : SB17.18914.4

**[MEMO ITEM]****B. Tortilla Coast**

Mailing Address 400 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Food and Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 29 / 2015

Amount of Each Disbursement this Period

30.14
-------

Transaction ID : SB17.18914.6

**[MEMO ITEM]****C. Executive Press**

Mailing Address 10412 Main Street

City	State	Zip Code
Fairfax	VA	22030

Purpose of Disbursement  
Fundraising mailing and printing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 27 / 2015

Amount of Each Disbursement this Period

1401.18
---------

Transaction ID : SB17.18879

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1401.18

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Long Nyquist Consulting**

Mailing Address 121 State Street

City	State	Zip Code
Harrisburg	PA	17101

Purpose of Disbursement  
Campaign Management Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.19199

**B. Long Nyquist Consulting**

Mailing Address 121 State Street

City	State	Zip Code
Harrisburg	PA	17101

Purpose of Disbursement  
Campaign management consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2015

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.18861

**c. Long Nyquist Consulting**

Mailing Address 121 State Street

City	State	Zip Code
Harrisburg	PA	17101

Purpose of Disbursement  
Campaign management consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2015

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.18906

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Constance McFadden**

Mailing Address 1408 Cherry Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
Fundrasing expense-catering

Amount of Each Disbursement this Period

5465.00
---------

Transaction ID : SB17.18911

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising expenses-see memos

Amount of Each Disbursement this Period

3889.20
---------

Transaction ID : SB17.18825

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**c. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising consulting

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : SB17.18825.0

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

5465.20
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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising postage reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

112.50
--------

Transaction ID : SB17.18825.1

**[MEMO ITEM]****B. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising supplies reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

36.50
-------

Transaction ID : SB17.18825.2

**[MEMO ITEM]****C. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Mileage reimbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

232.78
--------

Transaction ID : SB17.18825.3

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising expense-see memos

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

3750.38
---------

Transaction ID : SB17.18874

**B. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
fundraising consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : SB17.18874.0

[MEMO ITEM]

**c. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
reimbursed mileage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

232.78
--------

Transaction ID : SB17.18874.1

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3750.38
---------

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : SB17.18907

**B. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising expenses-see memos

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

4151.90
---------

Transaction ID : SB17.19083

**C. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Fundraising consulting

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

3500.00
---------

Transaction ID : SB17.19083.0

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

7651.90
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
reimbursed mileage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

384.40
--------

Transaction ID : SB17.19083.1

**[MEMO ITEM]****B. Robert H. Nelson**

Mailing Address 1829 Bay Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
reimbursed expenses-printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

52.50
-------

Transaction ID : SB17.19083.2

**[MEMO ITEM]****c. Sears Master Card**

Mailing Address PO Box 183082

City	State	Zip Code
Columbus	OH	43218

Purpose of Disbursement  
see memos

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		26		2015

Amount of Each Disbursement this Period

629.22
--------

Transaction ID : SB17.18845

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

629.22

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sunoco-Williamsport**

Mailing Address 3725 Lycoming Creek Rd

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2015

Amount of Each Disbursement this Period

38.10
-------

Transaction ID : SB17.18845.7

**[MEMO ITEM]****B. Bull Feathers**

Mailing Address 410 1st Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Meeting expense-food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2015

Amount of Each Disbursement this Period

42.18
-------

Transaction ID : SB17.18845.8

**[MEMO ITEM]****c. House of Representatives Gift Shop**

Mailing Address B218 Longworth Bldg

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
constituent gifts

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		23		2015

Amount of Each Disbursement this Period

120.00
--------

Transaction ID : SB17.18845.10

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Sears Master Card**

Mailing Address PO Box 183082

City	State	Zip Code
Columbus	OH	43218

Purpose of Disbursement  
see memos

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

Amount of Each Disbursement this Period

1341.71
---------

Transaction ID : SB17.18880

**B. Sunoco-Williamsport**

Mailing Address 3725 Lycoming Creek Rd

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2015

Amount of Each Disbursement this Period

33.00
-------

Transaction ID : SB17.18880.6

[MEMO ITEM]

**C. Sunoco-South Abington**

Mailing Address 800 Northern Boulevard

City	State	Zip Code
South Abington	PA	18411

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2015

Amount of Each Disbursement this Period

73.62
-------

Transaction ID : SB17.18880.10

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1341.71

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. House of Representatives Gift Shop**

Mailing Address B218 Longworth Bldg

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement  
Constituent gifts

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2015

Amount of Each Disbursement this Period

146.40
--------

Transaction ID : SB17.18880.13

**[MEMO ITEM]****B. Sunoco-Williamsport**

Mailing Address 3725 Lycoming Creek Rd

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2015

Amount of Each Disbursement this Period

44.30
-------

Transaction ID : SB17.18880.14

**[MEMO ITEM]****c. Sunoco-South Abington**

Mailing Address 800 Northern Boulevard

City	State	Zip Code
South Abington	PA	18411

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2015

Amount of Each Disbursement this Period

52.67
-------

Transaction ID : SB17.18880.15

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Any Event**

Mailing Address 820 Westminster Drive

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
event expense (canceled on 6/1/15)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 18 / 2015

Amount of Each Disbursement this Period

234.15
--------

Transaction ID : SB17.18880.17

**[MEMO ITEM]****B. Sears Master Card**

Mailing Address PO Box 183082

City	State	Zip Code
Columbus	OH	43218

Purpose of Disbursement  
see memos

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Disbursement this Period

2527.30
---------

Transaction ID : SB17.19049

**c. Capitol Hill Club**

Mailing Address 300 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
05 / 28 / 2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB17.19049.1

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2527.30



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Exxon Mobil Williamsport**

Mailing Address 1005 Heilman Road

City	State	Zip Code
Montoursville	PA	17754

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2015

Amount of Each Disbursement this Period

48.35
-------

Transaction ID : SB17.19049.2

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Trattoria Alberto**

Mailing Address 506 Eighth Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
meeting expense-food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2015

Amount of Each Disbursement this Period

462.80
--------

Transaction ID : SB17.19049.10

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Sunoco-Williamsport**

Mailing Address 3725 Lycoming Creek Rd

City	State	Zip Code
Williamsport	PA	17701

Purpose of Disbursement  
travel-fuel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

21.00
-------

Transaction ID : SB17.19049.11

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Holiday Inn- Dickson City**

Mailing Address 1265 Commerce Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2015

City	State	Zip Code
Dickson City	PA	18519

Amount of Each Disbursement this Period

275.94
--------

Purpose of Disbursement  
travel-lodgingCategory/  
Type

Transaction ID : SB17.19049.12

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Sunoco-Williamsport**

Mailing Address 3725 Lycoming Creek Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

City	State	Zip Code
Williamsport	PA	17701

Amount of Each Disbursement this Period

52.40
-------

Purpose of Disbursement  
travel-fuelCategory/  
Type

Transaction ID : SB17.19049.16

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Sunoco-South Abington**

Mailing Address 800 Northern Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

City	State	Zip Code
South Abington	PA	18411

Amount of Each Disbursement this Period

58.15
-------

Purpose of Disbursement  
travel-fuelCategory/  
Type

Transaction ID : SB17.19049.17

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Williamsport Crosscutters**

Mailing Address PO Box 3173

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2015

City	State	Zip Code
Williamsport	PA	17701

Amount of Each Disbursement this Period

380.00
--------

Purpose of Disbursement  
food and beverageCategory/  
Type

Transaction ID : SB17.19049.18

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Sunoco-Williamsport**

Mailing Address 3725 Lycoming Creek Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2015

City	State	Zip Code
Williamsport	PA	17701

Amount of Each Disbursement this Period

35.00
-------

Purpose of Disbursement  
travel-fuelCategory/  
Type

Transaction ID : SB17.19049.19

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Doubletree by Hilton**

Mailing Address 300 Army Navy Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2015

City	State	Zip Code
Arlington	VA	22202

Amount of Each Disbursement this Period

349.17
--------

Purpose of Disbursement  
travel-lodgingCategory/  
Type

Transaction ID : SB17.19049.21

**[MEMO ITEM]**

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Doubletree by Hilton**

Mailing Address 300 Army Navy Drive

City	State	Zip Code
Arlington	VA	22202

Purpose of Disbursement  
food and beverage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Disbursement this Period

302.95
--------

Transaction ID : SB17.19049.22

**[MEMO ITEM]****B. Verizon**

Mailing Address PO Box 4003

City	State	Zip Code
Acworth	GA	30101

Purpose of Disbursement  
Cellular phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

163.29
--------

Transaction ID : SB17.18836

**c. Verizon**

Mailing Address PO Box 4003

City	State	Zip Code
Acworth	GA	30101

Purpose of Disbursement  
cellular phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2015

Amount of Each Disbursement this Period

139.66
--------

Transaction ID : SB17.18875

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

302.95

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address PO Box 4003

City	State	Zip Code
Acworth	GA	30101

Purpose of Disbursement  
cellular phone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

Amount of Each Disbursement this Period

142.23
--------

Transaction ID : SB17.18910

**B. Widget Makr/Merchant Services**

Mailing Address 7704 Leesburg Pike

City	State	Zip Code
Falls Church	VA	22043

Purpose of Disbursement  
Credit card processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

29.05
-------

Transaction ID : SB17.18820

**C. Widget Makr/Merchant Services**

Mailing Address 7704 Leesburg Pike

City	State	Zip Code
Falls Church	VA	22043

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2015

Amount of Each Disbursement this Period

5.15
------

Transaction ID : SB17.18905

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

176.43

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Widget Makr/Merchant Services**

Mailing Address 7704 Leesburg Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2015

City	State	Zip Code
Falls Church	VA	22043

Amount of Each Disbursement this Period

1.48
------

Purpose of Disbursement  
credit card processing fee

Candidate Name

Category/  
Type**Transaction ID : SB17.18908**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. Widget Makr/Merchant Services**

Mailing Address 7704 Leesburg Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2015

City	State	Zip Code
Falls Church	VA	22043

Amount of Each Disbursement this Period

11.73
-------

Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
Type**Transaction ID : SB17.18967**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13.21

54214.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 82

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Friends of Dan Barrett**

Mailing Address 723 1/2 South Main St

City	State	Zip Code
Athens	PA	18810

Purpose of Disbursement  
Non-federal contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2015

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB21.18933

**B. Friends of Tony Mussare**

Mailing Address PO Box 1281

City	State	Zip Code
Williamsport	PA	17703

Purpose of Disbursement  
Non-federal contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2015

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : SB21.18816

**c. Monroe County Republican Committee**

Mailing Address 112A Park Avenue

City	State	Zip Code
Stroudsburg	PA	18360

Purpose of Disbursement  
Non-federal contribution

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB21.18928

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Northern Tier Conservation PAC**

Mailing Address 1776 Lick Run Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2015

City	State	Zip Code
Gaines	PA	16921

Amount of Each Disbursement this Period

1250.00
---------

Purpose of Disbursement  
Non-federal contributionCategory/  
Type**Transaction ID : SB21.18961**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Northern Tier Conservation PAC**

Mailing Address 1776 Lick Run Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2015

City	State	Zip Code
Gaines	PA	16921

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Non-federal contributionCategory/  
Type**Transaction ID : SB21.18962**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Northern Tier Conservation PAC**

Mailing Address 1776 Lick Run Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2015

City	State	Zip Code
Gaines	PA	16921

Amount of Each Disbursement this Period

750.00
--------

Purpose of Disbursement  
Non-federal contributionCategory/  
Type**Transaction ID : SB21.18963**

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00





**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**MARINO FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Long Nyquist Consulting**

Nature of Debt (Purpose):

**Campaign Management Fee**

Mailing Address 121 State Street

City State

Zip Code

Harrisburg

PA

17101

Outstanding Balance Beginning This Period

1000.00

**Transaction ID : SD10.18662**

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶